DIVISION OF SOCIAL SERVICES Subrecipient Self-Assessment of Internal Controls and Risks

Subrecipient Name <u>PAMLICO County Department of Social Services</u> Date Prepared <u>7-25-2011</u>

Answer "Yes" if activity in question is performed by another county agency, i.e., County Finance office or the County Manager's office. Each "No" answer indicates a potential weakness of internal fiscal controls. All "No" answers require an explanation of mitigating controls or a note of planned changes.

| | OL ENVIRONMENT ment's Philosophy and Operating Style |
|-----------------------|--|
| | 1. Are periodic (monthly, quarterly) reports on the status of actual to budgeted performance prepared and reviewed by top management? |
| | 2. Are unusual variances between budgeted revenues and expenditures and actual expenditures and revenues examined? |
| | 3. Is the internal control structure supervised and reviewed by management to determine if it is operating as intended? |
| B. Orga | anizational Structure |
| | 4. Is there a current organizational chart defining the lines of responsibility? |
| $\boxtimes \Box \Box$ | 5. Has all management staff been sufficiently trained to perform their assigned duties? |
| C. Assignm | nent of Authority and Responsibility |
| $\boxtimes \Box \Box$ | 6. Are sufficient training opportunities to improve competency and update employees on Program, Fiscal and Personnel policies and procedures available? |
| | 7. Have managers been provided with clear goals and direction from the governing body or top management? |
| | 8. Is program information issued by the Division of Social Services and other State and Federal agencies distributed to appropriate staff? |
| | |
| D. Compli | ance with Applicable Civil Rights Laws |
| | 9. Are program staff aware of requirements to comply with civil rights laws including Civil Rights Act of 1964, and the Americans with Disabilities Act? |
| | Assurances; Dear Director Letter PM-PC-03 NC Title VI County Compliance Officers Workshop dated 9/22/06) |

| Yes N/A No | |
|-----------------------------|--|
| | 10. Is annual training provided to appropriate staff to review civil rights laws and expectations for providing benefits and services in a nondiscriminatory manner? |
| | (Dear Director Letter FAEP-14-2004, Civil Rights |
| | Assurances; FNS Certification Manual Section 120.02 B) |
| $\boxtimes \Box \Box$ | 11. Are required civil rights posters prominently displayed in the lobby/reception |
| | area(s) of the agency? |
| | (FNS Certification Manual Section 120.02 C; Dear Director |
| | Letter PM-PC-03) |
| | 12. Are persons with Limited English Proficiency (LEP) provided the opportunity to |
| | obtain information from the agency both in person and by telephone? |
| | (Dear Director Letter PM-PC-02-2008) |
| \square \square | 13. Does the agency have adequate staff and/or contracts in place to provide language |
| | interpretation to LEP customers when the need is identified? |
| | (Dear Director Letter PM-PC-02-2008) |
| | 14. Does the agency have measures in place to communicate effectively with deaf or |
| | hard of hearing customers? (These may include sign language interpreters, access to a |
| | TTY machine or NC Relay telephone connectivity.) |
| | (Dear Director Letter PM-PC-02-2008) |
| | 15 Deep the agree where in place a Limited English Proficiency Plan? |
| $\boxtimes \sqcup \sqcup$ | 15. Does the agency have in place a Limited English Proficiency Plan? |
| | (Dear Director Letter PM-PC-02-2008) |
| $\boxtimes \sqcup \sqcup$ | 16. Does the agency have the required non-discrimination statement on each locally |
| | developed form intended for and used by customers? |
| | (Dear Director Letter PM-PC-01-2007) |
| | |
| II. <u>HUMAN</u> | RESOURCES |
| | |
| | Activities / Information and Communication: |
| Yes N/A No | |
| $\boxtimes \sqcup \sqcup$ | 1. Are personnel policies in writing? (Can be agency, county or state) |
| | *************************************** |
| $\boxtimes \square \square$ | 2. Are personnel files maintained for all employees? |
| | |
| | |
| $\boxtimes \Box \Box$ | 3. Are payroll costs accurately charged to federal and state grants using time spent in |
| | each program? |
| | |
| \square | 4. Are accurate, up-to-date-position descriptions available? |
| | |
| | 5. Do all supervisors and managers have at least a working knowledge of personnel |
| | |
| | policies and procedures? |
| | 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 |
| $\boxtimes \sqcup \sqcup$ | 6. Does each supervisor and manager have a copy or access to a copy of personnel |
| | policies and procedures? |
| | *************************************** |
| | |

| Yes N/A No | |
|-------------------------|--|
| | 7. Does management ensure compliance with the agency's personnel policies and procedures manual concerning hiring, training, promoting, and compensating employees? |
| | 8. Are the following duties generally performed by different people? a. Processing personnel action forms and processing payrolls? b. Supervising and timekeeping, payroll processing, disbursing, and making general ledger entries? |
| | c. Personnel and: 1) Approving time reports? 2) Payroll preparation? d. Recording the payroll in the general ledger and the payroll processing function? Comments: (8a-d) |
| $\boxtimes \Box \Box$ | 9. Is access to payroll/personnel files limited to authorized individuals? |
| $\boxtimes \Box \Box$ | 10. Are procedures in place to ensure that all keys, equipment, credit cards, cell phones, pagers, etc. are returned by the terminating employee? |
| $\boxtimes \Box \Box$ | Is information on employment applications verified and are references contacted? |
| III. ACCOU | NTS PAYABLE |
| A. Control A Yes N/A No | activities / Information and Communication: |
| $\boxtimes \Box \Box$ | 1. Has the agency established procedures to ensure that all voided checks are properly accounted for and effectively canceled? |
| | 2. Do invoice-processing procedures provide for: a. Obtaining copies of requisitions, purchase orders and receiving reports? b. Comparison of invoice quantities, prices, and terms with those indicated on the purchase order? |
| | c. Comparison of invoice quantities with those indicated on the receiving reports? d. As appropriate, checking accuracy of calculations? e. Alteration/mutilation of extra copies of invoices to prevent duplicate payments? f. All file copies of invoices are stamped paid to prevent duplicate payments? Comments: (2a-f) |
| | 3. Are payments made only on the basis of original invoices and to suppliers identified on supporting documentation? |
| | 4. Is the accounting and purchasing departments promptly notified of returned purchases, and are such purchases correlated with vendor credit memos? |
| | Are monthly reconciliation's performed on the following: a. All petty cash accounts? b. All bank accounts? i.eTrust Accounts, GA accounts etc. Comments: (5a-b) |

| Yes N/A No | 2 11 1200 4 4 4 4 10 | | |
|-----------------------|--|--|--|
| | 6. Are the following duties generally performed by different people? a. Requisitioning, purchasing, and receiving functions and the invoice processing, accounts payable, and general ledger functions? | | |
| | b. Purchasing, requisitioning and receiving?c. Invoice processing and making entries to the general ledger?d. Preparation of cash disbursements, approval of them, and making entries to the general | | |
| | ledger? e. Making detail cash disbursement entries and entries to the general ledger? Comments: (6a-e) | | |
| | 7. Is check signing limited to only authorized personnel? | | |
| | 8. Are disbursements approved for payment only by properly designated officials? | | |
| | 9. Is the individual responsible for approval or check signing furnished with invoices and supporting data to be reviewed prior to approval or check-signing? | | |
| $\boxtimes \Box \Box$ | 10. Are unused checks adequately controlled and safeguarded? | | |
| | 11. Is it prohibited to sign blank checks in advance? | | |
| $\boxtimes \Box \Box$ | 12. Is it prohibited to make checks out to the order of "cash"? | | |
| $\boxtimes \Box \Box$ | 13. If facsimile signatures are used, are the signature plates adequately controlled and separated physically from blank checks? | | |
| $\boxtimes \Box \Box$ | 14. Are purchase orders prenumbered and issued in sequence? | | |
| | 15. Are changes to contracts or purchase orders subject to the same controls and approvals as the original agreement? | | |
| | Are all records, checks and supporting documents retained according to the applicable (state or federal) record retention policy? | | |
| | *************************************** | | |

IV. COMPLIANCE SUPPLEMENT ELEMENTS

A/1: ACTIVITIES ALLOWED OR UNALLOWED

Each federal and State program has specific activities that are allowed or that may be unallowed. An example of a common unallowable activity under State or federal programs would be payments for lobbying activities designed to influence State or federal legislation. Activities allowed or unallowed from each funding source are identified in grant documents, allocation letters, contracts and State and federal legislation.

Control Activities / Information and Communication:

| Yes N/A No | |
|------------------------------------|--|
| | 1. Before expenditures are made, does someone check that funds used for that service are allowable? |
| | 2. Are expenditure/ reimbursement reports reviewed to ensure adherence to funding limits? |
| All costs char administration | ABLE COSTS/COST PRINCIPLES rged to State or federal funds must be reasonable and necessary for the operation and of the programs for which funding is received. Some funding sources limit the amount of ble for administration. |
| Control Activ Yes <u>N/A</u> No | rities / Information and Communication: |
| | 1. Does the agency have an approved indirect cost plan to allocate cost between federal programs or between federal and state programs? |
| $\boxtimes \Box \Box$ | 2. Has the approved plan been submitted to the Controller's office? |
| | 3. Are systems or other means established to prevent overpayments or payments to unauthorized subrecipients or individuals? 4. Are contract payments reconciled to the general ledger monthly? |
| | 5. Are payments to subrecipients required to be supported by a properly authorized request for reimbursement or request for an advance from the subrecipient? |
| | 6. Are expenditures to state or federal programs reviewed and approved by a person with approval authority? |
| | 7. Are personnel responsible for coding expenditures to state or federal programs properly trained to determine expenditures which are allowable and allocable to the federal programs? |
| | 8. Is the method of allocating cost understood by persons responsible for coding expenditures to state or federal programs? |
| | 9. Are comparisons made between prior year allowable services and current year allowable services? |
| | |

C/3: CASH MANAGEMENT

Control Activities / Information and Communication:

| <u>Yes N/A No</u> ⊠ □ □ | 1. Are requests for reimbursements (1571's) based on actual cash basis? |
|---|---|
| | 2. Are reimbursements to subrecipients/contractors of agency compared to contracts or agreements periodically? |
| | 3. Are reimbursements to sub recipients/contractors of the agency deferred until after the related expenditure is incurred? |
| | 4. Are the following duties generally performed by different people? |
| $\boxtimes \Box \Box$ | a. Preparing the Request for Reimbursement (1571)? |
| $\boxtimes \Box \Box$ | b. Reviewing and approving the Request for Reimbursement (1571)? |
| D: <u>DAVIS-B</u> | ACON ACT: This requirement is not applicable to DHHS subrecipients |
| E/5: ELIGIB Control Acti Yes N/A No | ILITY vities / Information and Communication: |
| | 1. Is there an up to date manual available to staff performing eligibility functions? |
| $\boxtimes \Box \Box$ | 2. Are staff performing eligibility functions adequately trained? |
| $\boxtimes \Box \Box$ | 3. Are client records periodically updated and reviewed to determine continued eligibility? |
| | |
| | MENT AND REAL PROPERTY MANAGEMENT (vities / Information and Communication: |
| Yes N/A No | yries / information and Communication: |
| | 1. Are fixed asset records maintained that adequately classify and identify individual items, as well as detailing their location? |
| $\boxtimes \Box \Box$ | 2. If there are any missing assets, is a missing asset form completed? |
| | Does the individual responsible for fixed assets perform the following: a. Attach fixed asset tags? b. Track when assets are received? c. Track when assets are donated? d. Track when asset location changes are made? |
| | e. Track when assets are sold? f. Track when assets are stolen or vandalized? g. Track when assets are reassigned to a different organizational entity or to another |
| | agency? Comments: (3a-g) |
| \square \square \square | 4. Are all disposals of property approved by a designated person with proper |
| | authority? |

| Yes N/A No | | |
|-----------------------------|----------------|---|
| | | Has agency management chosen and documented the threshold level for zation in an Internal Policy/Procedure Book? |
| $\boxtimes \Box \Box$ | 6. | Is someone assigned custodial responsibility by location for all assets? |
| $\boxtimes \Box \Box$ | 7. | Is access to the perpetual fixed asset records limited to authorized individuals? |
| $\boxtimes \Box \Box$ | 8. | Is there adequate physical security surrounding the fixed asset items? |
| $\boxtimes \Box \Box$ | 9. | Is there adequate insurance coverage of the fixed asset items? |
| $\boxtimes \Box \Box$ | 10. | Is insurance coverage independently reviewed periodically? |
| $\boxtimes \Box \Box$ | 11. | Is a fixed asset inventory taken annually? |
| $\boxtimes \Box \Box$ | 12. | Are missing items investigated and reasons for them documented? |
| G/7: <u>MATC</u> | <u>HING, I</u> | EVEL OF EFFORT, OR EARMARKING |
| - ' | vities / I | nformation and Communication: |
| Yes N/A No | 1. | Is appropriate action taken when matching or level of effort requirements are not |
| | | met as scheduled? |
| | 2. | Are matching or level of effort requirements budgeted for state or federal financial nee programs? |
| | assista | nce programs? |
| $\boxtimes \Box \Box$ | 3. | Are "in-kind" contributions and volunteer services properly documented? |
| H/8 <u>: PERIO</u> | D OF A | VAILABILITY OF FEDERAL FUNDS |
| Control Acti Yes N/A No | vities / I | nformation and Communication: |
| | 1. funds o | Does the accounting system prevent obligation or expenditure of State or Federal outside the availability period? |
| $\boxtimes \Box \Box$ | 2. | Is staff knowledgeable of grant cut-off dates? |
| $\boxtimes \square \square$ | 3. | Are unliquidated commitments cancelled at the end of the period of availability? |
| | | |

I/9: PROCUREMENT AND SUSPENSION AND DEBARMENT

Non-Federal entities are prohibited from contracting with or making subawards under covered transactions to parties that are suspended or debarred or whose principals are suspended or debarred. Covered transactions include procurement contracts for goods or services equal to or in excess of \$100,000 and all non-procurement transactions. http://www.epls.gov/ This website is provided by General Services Administration (GSA) for the purpose of disseminating information on parties that are

excluded from receiving Federal contracts, certain subcontracts, and certain Federal financial and nonfinancial assistance and benefits.

| Control Activ | rities / Information and Communication: |
|-----------------------------|---|
| Yes N/A No | 1. Is there established segregation of duties between employees responsible for contracting; accounts payable and cash disbursing? |
| | 2. Is the contractor's performance including the terms, conditions, and specifications of the contract monitored and documented? |
| $\boxtimes \Box \Box$ | 3. Do supervisors review procurement and contracting decisions for compliance with State and Federal procurement policies? |
| | 4. Are procedures established to verify that vendors providing goods and services under the award have not been suspended or debarred by the State or Federal Government? |
| | 5. Are there written policies for the procurement and contracts establishing: a. contract files, b. methods of procurement, c. contractor rejection or selection, d. basis of contract price, e. verification of full and open competition, f. requirements for cost or price analysis, g. obtaining and reacting to suspension and debarment certifications, h. other applicable requirements for Federal procurement, i. conflict of interest. ents: (5a-i.) |
| | 6. Is there written policy addressing suspension and debarments of contractors? |
| | 7. Is there a system in place to assure that procurement documentation is retained for the time period required by the A-102 Common Rule, OMB Circular A-110, award agreements, contracts, program regulations, and Social Services Record Retention schedule? |
| $\boxtimes \square \square$ | 8. Are there proper channels for communicating suspected procurement and |
| | contracting improprieties? |
| | |

J/10: PROGRAM INCOME

Control Activities / Information and Communication:

| Yes N/A No | |
|---------------------------|---|
| $\boxtimes \Box \Box$ | 1. Are collection policies and procedures clearly documented and communicated to personnel responsible for program income? |
| | 2. Are policies and procedures in place to ensure program income is deposited in the bank and reported as collected? |
| | 3. Are there policies and procedures to provide for the correct use of program income as directed by State or Federal program requirements? |
| $\boxtimes \Box \Box$ | 4. Does the accounting system properly identify program income? |
| | 5. Are there proper channels for communicating suspected improprieties in the collection or use of program income? |
| $\boxtimes \Box \Box$ | 6. Does management compare actual program income to budget and investigate differences? |
| K/11: <u>REA</u> | L PROPERTY ACQUISITION AND RELOCATION ASSISTANCE: This requirement |
| does n | ot apply to DHHS. |
| and effective | PRTING lodic reporting subrecipients provide some assurance that funds are being managed efficiently by to accomplish the objectives for which the funds were provided. State and federal program call for a variety of financial, performance and special reporting. |
| Control Act Yes N/A No | ivities / Information and Communication: |
| $\boxtimes \Box \Box$ | 1. Are personnel responsible for submitting required reporting information adequately |
| | trained? |
| | a non-business day). 3. Does the agency comply with proper record retention schedules issued by the N. C. Department of Cultural Resources, Division of Archives and History entitled "Records Retention and Disposition Schedule" for the Department of Social Services and DHHS Policy contained in the current revision of the following letters from the Office of the Controller "Records Retention And Disposition Schedule Memorandum and "Records Retention And Disposition Schedule Spreadsheet"? |
| $\boxtimes \Box \Box$ | 4. Are salaries paid at the approved rate in accordance with the county pay plan? |
| $\boxtimes \Box \Box$ | 5. Are salaries for all county DSS employees reported on the DSS-1571? |
| $\boxtimes \Box \Box$ | 6. Are fringe benefits claimed at the authorized rate? |
| | *************************************** |

DHHS

| Yes N/A No | |
|------------|---|
| | 7. Are Day sheets maintained by all staff having direct client contact when mandated and performing client-related activities in more than one program? |
| M/13- SURD | FCIPIENT MONITODING |

If Federal or State funds are subgranted by the agency, the agency has the responsibility, as required by Federal and State regulations, to develop procedures to monitor that funds are appropriately spent by its subrecipient. The requirement to monitor applies only in instances where the subrecipient is granted the funds as financial assistance, and does not apply to purchase of service contracts and agreements. For example, an agreement where a subrecipient will determine eligibility for Crisis Intervention Program (CIP) payments must be monitored. An agreement where a contractor provides maintenance to computer systems does not require monitoring, even if Federal or State funds will be used to support the contract.

Control Activities / Information and Communication:

| Yes N/A No | |
|-----------------------|---|
| | 1 .Is a master list maintained of all contracts? |
| | 2. Is the master list of subrecipients/contracts updated as contracts are signed or |
| | terminated? |
| | 4. Are findings identified in audit reports on subrecipients entered into a tracking system or otherwise identified for an audit resolution process? |
| | 5. Are responses from subrecipients/Contractors indicating action to be taken on findings entered into a tracking system or otherwise identified for an audit resolution |
| \square | process? 6. Are audit findings identified in audit reports for subrecipients assigned to |
| | appropriate personnel to resolve the findings? |
| $\boxtimes \Box \Box$ | 7. Is the audit resolution process periodically reviewed to determine that audit |
| | findings have been resolved? |
| | 8. Is the monitoring guide up-to-date and does it cover all aspects of the program which would not be included in the compliance audit of the program? |
| MUU | 9. Are monitors adequately trained to evaluate the programs administered by |
| | subrecipients/Contractors? |
| \square | 10. Do monitors use a monitoring guide? |
| | 11. Do monitors consider factors such as size of grants, prior monitor findings, |
| | compliance audit findings, the size of the organization receiving the grant, and the experience of the organization in administering the program in selecting subrecipients for |
| | monitoring visits? |
| . | designated officials? |

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N/14: Special Tests and Provisions

The specific requirements for Special Tests and Provisions are unique to each Federal and State program and are found in the laws, regulations, and the provisions of contract or grant agreements pertaining to the program. For programs listed in the annual State Compliance Supplement, the compliance supplements specify the criteria for Special Tests and Provisions. Requirements that are in all programs are found in the annual crosscutting requirements document.

| Yes N/A No | vities / Information and Communication: |
|---------------------------------------|---|
| | 1. Are compliance supplements reviewed annually by appropriate staff? |
| | Are the crosscutting requirements reviewed annually by appropriate staff? |
| V. <u>Yes N/A</u> <u>No</u> | DAY SHEET TRAINING |
| | 1. The agency provided Day Sheet training for all appropriate staff during this past fiscal year. If yes, indicate the total number of staff trained 8 |
| VI. Yes <u>N/A</u> No | SINGLE AUDIT |
| x□□ ⊠□□ | The agency was audited by an objective public accounting firm this past fiscal year? Appropriate agency staff reviewed the findings of the previous years' audit as preparation for current year audit. |
| $\boxtimes \Box \Box$ | 3. All audit findings and questioned costs from previous years have been appropriately resolved |
| Responses of | TIONAL INFORMATION/ EXAMINATIONS OF AGENCY "No" in this section do not signify internal control weaknesses to be considered in ation of subrecipient. |
| Yes N/A No | |
| ППХ | 1. Has the agency undergone any other examination, monitoring, or investigation (either by an external entity or by internal audit staff) during the past year? If yes, please indicate the name of the review. |
| X 00 | 2. Has the agency undergone any reviews by the Division of Social Services in the past year? If so, please indicate the name of the review. Medicaid Review (Nov. 2011) Food Stamp Review (May 2011), WOrk First Audit (April 2011), SSBG Review (Fedb 2011) |

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VIII. SECURITY ACCESS FOR INFORMATION SYSTEMS

(North Carolina Division of Social Services Information Security Manual)

The State of North Carolina's information and information systems are valuable assets that must be protected. Appropriate policies and procedures, must be in place to protect all information assets from accidental or unauthorized use, theft, modification, destruction, and to prevent the unauthorized disclosure of restricted information.

Control Activities / Information and Communication: Yes N/A No

file for audit purposes.

Reports

| no when an employee changes positions within the agency, system access for the prior position is revoked. This request must be completed via an updated electronic Information Resource Access Authorization Form (e-IRAAF). |
|---|
| 2. When an employee terminates employment for any reason, the Security Officer will request the CSC to terminate all accesses immediately. This request must be completed via an updated electronic Information Resource Access Authorization Form (e-IRAAF). |
| 3. The Agency Security Officer will review and document findings on the following reports for assigned security information systems. This review must occur at least every six months starting in FY beginning July 2009. Documentation of findings shall be kept |

| SYSTEM | REPORT NAME |
|--------------------------------------|--|
| Crisis Intervention Program (CIP) | In the CIP system, under the Reports |
| | Section, click on the County Staff Listing |
| | and select your county. |
| Central Registry | NCXPTR: DHRCYA CYA SECURITY |
| | REPORT |
| Eligibility Information System (EIS) | NCXPTR: DHREJA SECURITY REPORT |
| | BY COUNTY |
| Enterprise Program Integrity Control | NCXPTR: DHRFRD FRD440-1 ACTIVE |
| System (EPICS) | USERS |
| Employment Programs Information | NCXPTR: DHRWFJ SECURITY- |
| System (EPIS) | ACTIVE IDS |
| Foster Care and Adoptions | NCXPTR: DHRPQA SECURITY TABLE |
| | REPORT |
| Foster Care Facility Licensing | NCXPTR: DHRFCF FCF FCF900-1 |
| System (FCFLS) | SECURITY REP |
| Food Stamp Information System | NCXPTR: DHRSLA RACF SECURITY |
| (FSIS) | COUNTY REPORT & DHRSLA RACF |
| | SECURITY REFERENCE (if needed) |
| | |

for audit purposes. Appendix 13 of the Security Manual must be completed and kept on

DHHS

| Low Income Energy Assistance | NCXPTR: DHREPA LIEAP SECURITY |
|-----------------------------------|---------------------------------------|
| Program (LIEAP) | REPORT |
| Services Information System (SIS) | NCXPTR: DHRSYA SYA SECURITY REPORT |
| TANF Data Collection System | NCXPTR: DHRWRA TDC SECURITY |
| (TDC) | RPT |

|--|--|

4. The Agency Security Officer will review and document findings on the following two reports: DHRBDA DHHS RACF USERID REPORT, available in NCXPTR; and the WIRM REPORT PROD report, available via the WIRM portal (https://wirm.dhhs.state.nc.us). The "Local DSS System Access Control" form must be emailed to DSS.Security.Review.Manager@dhhs.nc.gov to document findings of these reviews. The reviews must be conducted monthly and documentation must be emailed to the Performance Management Section (at the email address above) by the 20th of each month, unless an alternative schedule is specified by the DHHS Privacy and Security Office and the Performance Management Section.

Please list dates Agency Security Officer completed the above listed Security Reviews. 4/27/11 and 5/31/11

IX. CERTIFICATION

I hereby certify that the information presented in this self-assessment of internal controls and risk is true, accurate, and complete, to the best of my knowledge.

PAMLICO County Department of Human Services

Agency Name

Signature, Agency Director (REOUIRED)

7-26-11